

APPLICATION FOR CONSTRUCTION PERMIT FOR SCHOOL FACILITIES

State Form 50231 (R2 / 8-06) INDIANA STATE DEPARTMENT OF HEALTH / SANITARY ENGINEERING Approved by State Board of Accounts, 2006

DATE RECEIVED	
RECEIPT NUMBER	

PROJECT NUMBER _____

INSTRUCTIONS: 1. Send check or money order along with plans to: Indiana State Department of Health P O Box 7236 Indianapolis, IN 46207-7236

2. Direct questions to 317/233-7177

FAXED COPIES OF APPLICATIONS

		WILL NOT BE ACCEPTED			
1.	OWNER	5.	5. The Following Documents are Attached: (CHECK WHERE APPLICABLE)		
	Name		A.	Water Supply: □Public □Private	□Existing □New
	Phone No			Plot Plan with Site Utilities Sewage Disposal:	
2.	OWNER'S DESIGNATED AGENT Name		D	□Public □Private	☐ Existing ☐ New
	Title			Plans and Specifications of Architect or Engineer:	
	Address		E.	Enrollment(1) Pre-K/Elementary	
	Phone No			(2) Secondary/Above	
3.	FACILITY (TYPE OF PROJECT)		F.	Fees required by 410 (see other side)	AC 6-12-17.
	NameAddress	6.	App	SNATURE Dilication is hereby made for the foreign the activities described.	
	City County Zip	certify that I am familiar with the information contained in this application, and to the best of my knowledge and belief such information is true, complete, and accurate.		nd to the best ach information	
4.	ENGINEER/ARCHITECT Name			·	
	Address		Prin	nted Name of Person Signi	ng
			Title)	
	Phone No.		Signature of Owner or Designated Agent		ated Agent
	License #		Dat	e Application signed (moni	th, day, year)

INSTRUCTIONS FOR COMPLETION OF CONSTRUCTION PERMIT FOR SCHOOL FACILITIES

- 1. Owner
- 2. Authorized Agent
- 3. Name of Facility or Project
- 4. Name of Engineer/Architect
- Check the squares indicating name of documents attached to Application.
 All documents are required except where inapplicable.

Name and address of person, company, firm, municipality, authority, etc.,

Name, title, address, and phone number of person who is designated to act for owner and who is familiar with the project and can furnish additional information as required.

State its name, location, and nearest possible address.

Name, title, company, address and phone number of engineer or architect registered in the State of Indiana who certified and sealed the construction plans and specifications.

- A. Specify the type of water supply serving the subject facility, and whether new or existing.
- B. Plot plan or plans to scale showing property lines, structures, roads, and site utilities.
- C. Specify the type of sewage disposal serving the child care facility, and whether new or existing.
- D. Plans, drawn to scale, shall be prepared, by an individual qualified under applicable laws of the State of Indiana. (See No. 4 above, if applicable).
- E. Specify the building enrollment and indicate the Grade level below.
 - (1) Pre-K/Elementary
 - (2) Secondary/Above
- F. Fees Required by Rule 410 IAC 6-12-17.

If this application includes the construction of an On-site Sewage Disposal System, there is a fee for the disposal system plan review. \$200

6. Signature

An application submitted by a school corporation must be signed by a school superintendent or his duly authorized representative, if such a representative is responsible for the overall operation at the facility from which the construction described in the form will originate.